		N	IASA QUALITY SURVI	EILLANCE REPOR	RT	
REPORT NUMBER: PROJECT:				TEST POSITION / WORK AREA:		
					DATE:	
			I. SURVEILLANC	E CHECKLIST		
YES	NO	N/A				
			1. Work is performed to approve	ed documentation.		
			2. Personnel have work authorizing documentation on site.			
			3. Drawings/schematics are available as required on site.			
			4. Personnel are properly trained/certified.			
			5. Cleanliness is being maintained per OI.			
			6. Equipment has evidence of prooftest/calibratioon/certification.			
			7. Items environmentally controlled as required.			
			8. Special processes are being performed per applicable requirements.			
			9. Lockout - Tagout implement	ed as required.		
			10. Compliance with procedures	s, inspection requirements.		
			11. Compliance with FOD control procedures.			
	II.	OBSER	RVATIONS OF NONCONFORM	MANCES OR UNSAFE CO	ONDITIONS	
			BROKEN BOLTS, TRIPPING HAZARDS, RAPS, PROPER EXPLOSIVE STORAGE SECURED EQUIPMENT, AI	AND HANDLING, PREVENTIVE		
OTPS/05	SDN INITI	ATED "RE	CORD NUMBER":			
Q11 5/Q0	JUN IINITI	AILD NE	JOND NOMBEN.			
PERSONNEL NOTIFIED						
NASA:			CC	ONTRACTOR:		